Fill in this information to identify your case:

Debtor 1 **Laura** **Mendoza Garcia**
First Name   Middle Name   Last Name

Debtor 2
(Spouse, if filing) First Name   Middle Name   Last Name

United States Bankruptcy Court for the: District of **New Jersey**

Case number (if
known)

☒ Check if this is an
amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property   12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

1. **Do any creditors have claims secured by your property?**

☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.

☒ Yes. Fill in all of the information below.

Part 1:	List All Secured Claims		

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.

| | Column A
Amount of claim
Do not deduct the value of collateral | Column B
Value of collateral that supports this claim | Column C
Unsecured portion
If any |
| --- | --- | --- | --- |

2.1 **Planet Home Lending**

Describe the property that secures the claim: $328,797.00 $166,670.00 $162,127.00

Creditor's Name

321 Research Parkway Ste 303

| 15 Mohawk Avenue Hawthorne, NJ 07506 |

Number   Street

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Meriden, CT 06450

City   State   ZIP Code

Nature of lien. Check all that apply.

Who owes the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☒ At least one of the debtors and another
☐ Check if this claim relates to a community debt

☒ An agreement you made (such as mortgage or secured car loan)
☐ Statutory lien (such as tax lien, mechanic's lien)
☐ Judgment lien from a lawsuit
☐ Other (including a right to offset) _____

Date debt was incurred _____   Last 4 digits of account number   5 8 0 7

Add the dollar value of your entries in Column A on this page. Write that number here: $328,797.00

Fill in this information to identify your case:

Debtor 1	**Laura**		**Mendoza Garcia**
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name

United States Bankruptcy Court for the: District of   **New Jersey**

Case number
(if known) _____

🔲 Check if this is an
amended filing

Official Form 106E/F

Schedule E/F: Creditors Who Have Unsecured Claims   12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property.* If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

Part 1:	List All of Your PRIORITY Unsecured Claims

1. **Do any creditors have priority unsecured claims against you?**
   - 🔲 No. Go to Part 2.
   - ☑ Yes.

2. **List all of your priority unsecured claims.** If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

   (For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1 **Dean J Despotovich** Priority Creditor's Name **328 CLIFTON AVE** Number Street **Clifton, NJ 07011** City State ZIP Code	Last 4 digits of account number ___ ___ ___ ___ When was the debt incurred? _____	$3,500.00	$3,500.00	$0.00

Who incurred the debt? Check one.
- ☑ Debtor 1 only
- 🔲 Debtor 2 only
- 🔲 Debtor 1 and Debtor 2 only
- 🔲 At least one of the debtors and another
- 🔲 Check if this claim is for a community debt

Is the claim subject to offset?
- ☑ No
- 🔲 Yes

As of the date you file, the claim is: Check all that apply.
- 🔲 Contingent
- 🔲 Unliquidated
- 🔲 Disputed

Type of PRIORITY unsecured claim:
- 🔲 Domestic support obligations
- 🔲 Taxes and certain other debts you owe the government
- 🔲 Claims for death or personal injury while you were intoxicated
- ☑ Other. Specify **Attorney Fees** _____

Debtor 1   __Laura_____ __Mendoza Garcia_____   Case number *(if known)* _____
            First Name   Middle Name   Last Name

Part 2:	**List All of Your NONPRIORITY Unsecured Claims**

3.   Do any creditors have nonpriority unsecured claims against you?

☐ No. You have nothing to report in this part. Submit this form to the court with your other schedules.

☑ Yes

4.   List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

		Total claim

4.1   BANK OF AMERICA

Nonpriority Creditor's Name

PO BOX 15796

Number   Street

WILMINGTON, DE 19886

City   State   ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☑ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number   __4   4   9   8__

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

$4,832.77

4.2   BANK OF AMERICA

Nonpriority Creditor's Name

PO Box 15019

Number   Street

WILMINGTON, DE

City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number   __6   0   7   2__

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

$4,448.77

Debtor 1   __Laura__   __Mendoza Garcia__   Case number *(if known)* _____
      First Name   Middle Name   Last Name

Part 2:   Your NONPRIORITY Unsecured Claims — Continuation Page

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.   **Total claim**

4.3 **BANK OF AMERICA**

Nonpriority Creditor's Name

PO Box 15019

Number   Street

WILMINGTON, DE

City   State   ZIP Code

Who incurred the debt? Check one.

☑ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☐ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number   7   8   0   5   **$2,421.61**

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

4.4 **CAPITAL ONE**

Nonpriority Creditor's Name

PO Box 4069

Number   Street

CAROL STREAM, IL

City   State   ZIP Code

Who incurred the debt? Check one.

☐ Debtor 1 only
☐ Debtor 2 only
☐ Debtor 1 and Debtor 2 only
☑ At least one of the debtors and another
☐ Check if this claim is for a community debt

Is the claim subject to offset?

☑ No
☐ Yes

Last 4 digits of account number   2   8   3   1   **$4,804.14**

When was the debt incurred?   _____

As of the date you file, the claim is: Check all that apply.

☐ Contingent
☐ Unliquidated
☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans
☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
☐ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

Debtor 1   __Laura__ _____ __Mendoza Garcia__ _____   Case number *(if known)* _____
          First Name   Middle Name   Last Name

Part 2:	**Your NONPRIORITY Unsecured Claims — Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.   **Total claim**

4.5		
CAPITAL ONE	Last 4 digits of account number 2 5 9 8	$5,835.72

Nonpriority Creditor's Name

PO Box 4069

Number   Street

When was the debt incurred?   _____

CAROL STREAM, IL

City   State   ZIP Code

As of the date you file, the claim is: Check all that apply.

❑ Contingent
❑ Unliquidated
❑ Disputed

Who incurred the debt? Check one.

☑ Debtor 1 only
❑ Debtor 2 only
❑ Debtor 1 and Debtor 2 only
❑ At least one of the debtors and another
❑ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

❑ Student loans
❑ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
❑ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

Is the claim subject to offset?

☑ No
❑ Yes

4.6		
CHASE BUSINESS	Last 4 digits of account number 3 3 6 5	$7,000.00

Nonpriority Creditor's Name

CARDMEMBER SERVICE

PO Box 1423

Number   Street

When was the debt incurred?   _____

Charlotte, NC 28201

City   State   ZIP Code

As of the date you file, the claim is: Check all that apply.

❑ Contingent
❑ Unliquidated
❑ Disputed

Who incurred the debt? Check one.

☑ Debtor 1 only
❑ Debtor 2 only
❑ Debtor 1 and Debtor 2 only
❑ At least one of the debtors and another
❑ Check if this claim is for a community debt

Type of NONPRIORITY unsecured claim:

❑ Student loans
❑ Obligations arising out of a separation agreement or divorce that you did not report as priority claims
❑ Debts to pension or profit-sharing plans, and other similar debts
☑ Other. Specify _____

Is the claim subject to offset?

☑ No
❑ Yes

Debtor 1   __Laura_____   __Mendoza Garcia_____   Case number *(if known)* _____
            First Name   Middle Name   Last Name

Part 2:	**Your NONPRIORITY Unsecured Claims — Continuation Page**

After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth.   **Total claim**

| 4.7 | **Main Street 331 Associates LLC** | Last 4 digits of account number ___ ___ ___ ___ | **$10,000.00** |

Nonpriority Creditor's Name

C/O Broadway Pizza   When was the debt incurred?   _____

56 Broadway_____
Number   Street   As of the date you file, the claim is: Check all that apply.

                                        ☐ Contingent
PATERSON, NJ 07505   ☐ Unliquidated
City   State   ZIP Code   ☑ Disputed

Who incurred the debt? Check one.   **Type of NONPRIORITY unsecured claim:**

☑ Debtor 1 only   ☐ Student loans
☐ Debtor 2 only   ☐ Obligations arising out of a separation agreement or divorce that you did not report as
☐ Debtor 1 and Debtor 2 only   priority claims
☐ At least one of the debtors and another   ☐ Debts to pension or profit-sharing plans, and other similar debts
☐ **Check if this claim is for a community debt**   ☑ Other. Specify _____

Is the claim subject to offset?
☑ No
☐ Yes

Debtor 1   __Laura_____ __Mendoza Garcia_____ Case number *(if known)* _____
            First Name   Middle Name   Last Name

| Part 3: | List Others to Be Notified About a Debt That You Already Listed |

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a
    collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection
    agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If
    you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

```
1.
```
Firstsource Advantage_____
Name

P O BOX 1280_____
Number   Street

_____

Oaks, PA 19456_____
City   State   ZIP Code

On which entry in Part 1 or Part 2 did you list the original creditor?

Line __4.4__ of *(Check one)*:

☐ Part 1: Creditors with Priority Unsecured Claims
☑ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number   __ __ __ __

Debtor 1   **Laura** _____ **Mendoza Garcia** _____   Case number *(if known)* _____
First Name   Middle Name   Last Name

Part 4:	**Add the Amounts for Each Type of Unsecured Claim**

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.
Add the amounts for each type of unsecured claim.

				Total claim
Total claims from Part 1	6a.	Domestic support obligations	6a.	$0.00
	6b.	Taxes and certain other debts you owe the government	6b.	$0.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	$0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d. +	$3,500.00
	6e.	**Total.** Add lines 6a through 6d.	6e.	$3,500.00

				Total claim
Total claims from Part 2	6f.	Student loans	6f.	$0.00
	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	$0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	$0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. +	$39,343.01
	6j.	**Total.** Add lines 6f through 6i.	6j.	$39,343.01